

Hi everyone

Please find below the latest ASAP news.

## NEW In-Clinic Instrument Range Package Now Available

ASAP is pleased to announce the launch of a collaboration with REM systems for the provision of Veterinary Diagnostic Services which will provide a new complete pathology package to our clients.



We are now able to offer unbeatable value in the provision of a combined external pathology and in-house pathology service to meet your needs, combining the external ASAP Laboratory pathology service and the **Abaxis®** leading-edge point-of-care technologies VetScan Product range for veterinary practices.

Below are some highlights of our exciting NEW offer:

- \* No finance Required
- \* Attractive Rebates for ASAP clients
- \* Unbeatable Economy
- \* Free Pathologist Interpretation of Results
- \* Free Medicine Specialist Support
- \* State of the Art Minimal Sample Handling
- \* Integrated With Most Practice Software
- \* Ultimate Support; 24 hour return to function guarantee - or we will run your tests at our lab at reagent cost

Please [contact us](#) to arrange an in-clinic meeting to discuss your needs OR [Book a free, no-obligation, 2-week trial of the instruments in your practice.](#)

Our in-house pathology instrument range includes the state-of-the-art Vetscan VS2 biochemistry and electrolyte analyser, the HM-5 haematology analyser, the Vetscan i-Stat hand held analyser and the new VSPRO coagulation / specialty analyser. The Vetscan range offers several distinct advantages, including minimal hands-on time, minimal maintenance and compact design. **Comprehensive support is also available from specialist Dr Bruce Mackay BVSc, FANZCVS (Specialist Canine Internal Medicine) at Veterinary Specialist Services** which have been using the Abaxis analyzers for their in house pathology for the last 15 years.



**Abaxis University—Experience Learning at Your Convenience.** Complimentary online continuing education for veterinarians, nurses and practice management professionals. Learn live or on-demand. You choose. Learn anywhere, anytime – at your own pace, from your clinic, office or home. The Abaxis University Learning Centre provides [continuing education](#) via RACE CE. These [courses](#) are applicable for CE points in Australia. In addition to an extensive list of [continuing](#) veterinary education courses, offered both live and on-demand, Abaxis University now

offers personalised access to complimentary quality courses on various subjects and disciplines for veterinary professionals. Go to [www.Abaxisuniversity.com](http://www.Abaxisuniversity.com) to see what other on demand courses are available.

## ASAP 2015 Webinar Program



The poster features the ASAP Laboratory logo at the top left, with a background image of hands typing on a laptop. A dark blue banner across the top contains the text '2015 Webinars for Veterinarians & Nurses'. Below this, the program is organized into two columns of dates and topics, each with a small circular portrait of the speaker. The ASAP Laboratory logo is repeated at the bottom right of the poster.

**2015 Webinars for Veterinarians & Nurses**

**Tuesday 10th March, 8pm**  
A Refresher on Blood Film Examination  
Dr. Carl Muhrnickel  
Senior Clinical Pathologist  
ASAP Laboratory

**Tuesday 22nd September 8pm**  
Equine Topic TBA  
Dr. Laura Hardefeldt  
Registered Specialist in Large Animal Medicine  
Tarwin Vet Group, Leongatha.

**Tuesday 14th April 8pm**  
Mastering the Orthopaedic Exam  
Tips and Tricks  
Dr. Chris Preston  
Registered Specialist  
Small Animal Surgery  
Pet Emergency and Specialist Centre

**Tuesday 20th October 8pm**  
Immunohistochemistry  
– when to use it and why?  
Dr. Lorna Rasmussen  
Registered Specialist Pathologist  
ASAP Laboratory.

**Tuesday 2nd June, 8pm**  
Non-Chemotherapy Options for Cancer  
Dr. Laura Brockley  
& Dr. Maureen Cooper  
Registered Specialists in Small Animal Oncology  
Victorian Animal Cancer Care

**Tuesday 17th November, 8pm**  
Diagnosis and Management of Anaemia in Cats  
Dr. Carolyn O'Brien  
Registered Feline Specialist  
Melbourne Cat Referral

**Tuesday 4th August 8pm**  
Otitis Management and Treatments  
Dr. Fiona Bateman  
Animal Dermatology Solutions

**Tuesday 8th December 8pm**  
Topic TBA  
Dr Steve Holloway,  
Registered Specialist  
Small Animal Medicine  
Advanced VetCare

We are pleased to announce this year's [webinar](#) program, as always packed with interesting topics and useful tips brought to you by some of the leading veterinarians in Melbourne.

All webinars are free for both veterinarians and nurses to attend.

[Please click here to view the full program](#) or [register](#) for any of the webinars.

You can also [download](#) the PDF brochure and print for [sharing](#) with your clinic staff

This year you may claim AVA VetEd points as well as your normal CPD points

We hope to see you all online.



## ADRENALS: What you wont find in a Text Book

Dr. Sue Foster, our medicine specialist consultant, is [sharing](#) her knowledge and experinece in an 8-part sesies on Adrenal Disease. They will foillow sequentially in coming newsletters.

### **PART 1: SIGNALMENT**

#### **Hyperadrenocorticism (hyperA)**

1. *“If you see a Maltese >10 y.o. which does not have hyperA then adrenal function testing must not have been performed!!!”*

Whilst this is my somewhat facetious comment, it may actually be true. If you do have an 11 y.o Maltese which has no clinical signs of hyperA, has normal ALP concentration (on a commercially performed laboratory assay) and has at least one normal adrenal function test, then I would be interested to hear from you (as I want to know if they do exist!).



2. It was long believed that Scottish Terriers had a breed-related increase in ALP with age.<sup>1</sup> That always seemed unlikely given the very high prevalence of hyperA in aged Scottish Terriers (they may well be like Maltese...ie any Scottie over 10 y.o. requires adrenal function tests!). There has now been a thorough paper investigating clinically healthy, aged Scottish Terriers with increased ALP and investigated their adrenal function. Not surprisingly, the increased ALP was found to be associated with sub-clinical hyperadrenocorticism when rigorous testing was performed.<sup>2</sup>
3. Hypertriglyceridaemia can occur as a breed phenomenon in Miniature Schnauzers. There are now many papers on hypertriglyceridaemia in Minature Schnauzers including papers on the association between cPLI increase, possible pancreatitis and hypertriglyceridaemia in this breed.<sup>3</sup> To the best of my knowledge, none of these papers have studied adrenal function tests concurrently to check whether clinical or sub-clinical hyperA could have [accounted](#) for the hypertriglyceridaemia or cPLI increases. A very recent study has [confirmed](#) the suspicion of most internists that cPLI is often increased in healthy dogs with hyperadrenocorticism.<sup>4</sup> Middle to old-aged Miniature Schnauzers definitely get hyperadrenocorticism and their triglycerides improve after treatment suggesting that, in addition to breed-related hypertriglyceridaemia, hyperA must be on the DDx list for any Miniature Schnauzer of appropriate age with hypertriglyceridaemia,
4. In Australia, I see many late middle-aged to old Australian Cattle dogs with hyperA (both clinically and through the lab). It is likely that the number of

cases in this medium breed dog may be due to genuine predisposition rather than overall breed prevalence in Australia. In this breed, signs of hyperA can be very subtle and include slight roughening and colour change in the hair coat (can look as though coat just singed slightly, especially at the base of the neck), panting at rest on cool days, altered body shape and **ruptured cruciate ligaments**. Polydipsia and polyuria are not always present, ALP is not always increased and alopecia is never present (though some may be [slow](#) to regrow after a clip...watch after cruciate surgery!). HyperA in this breed is nearly always pituitary dependent.

5. Similar to the published literature, other breeds diagnosed include poodles, Pomeranians, Beagles, Boxers and Dachshunds.
6. The commonly cited figures for hyperA are that pituitary dependent hyperadrenocorticism (PDH) comprises 85% with adrenal tumours (ATs) comprising 15%.<sup>4</sup> A check on the endogenous ACTH assay results from Vetnostics (Sydney) prior to routine use of ultrasonography demonstrated that 98% of 200 dogs with hyperadrenocorticism had pituitary dependent hyperA. Could the difference in prevalence be related to dog size? A relatively recent North American paper evaluating trilostane in dogs reported the mean weight of dogs with hyperA to be 20.7 kg (PDH 20.42 kg). Not many (if any) Australian vet clinics would have 20.7kg as the mean weight of their hyperA patients. I suspect this different breed population affects the ratio of PDH to AT and also dosing for trilostane (to be discussed in the treatment tips!).

### Hypoadrenocorticism (hypoA)

1. The most common breed category diagnosed with hypoA (in NSW at least) has to be the Jack Russell/Fox Terrier group. Not all of these dogs will have electrolyte abnormalities as some will have a pure glucocorticoid deficiency. So if there are vague or suggestive [signs in](#) a 5-7 y.o. JRT or Fox terrier, especially if there is no stress leucogram (or a "reverse stress leucogram" ie lymphocytes and eosinophils high normal or increased in a sic! k dog), consider doing an ACTH stimulation test.
2. Maltese get hypoA in addition to hyperA!
3. Similar to the published literature, other breeds diagnosed with hypoA in Australia include poodles and "oodles" (all sizes), German Shepherds, German short-haired pointers, Great Danes and Portugese Water Dogs.

### REFERENCES

1. Nestor DD et al. Serum alkaline phosphatase [activity](#) in Scottish Terriers versus dogs of other breeds. *J Am Vet Med Assoc* 2006;228:222-224
2. Zimmerman KL et al. Hyperphosphatasemia and concurrent adrenal gland dysfunction in apparently healthy Scottish Terriers. *J Am Vet Med Assoc* 2010;237:178-185
3. Xenoulis PG et al. Serum triglyceride concentrations in Miniature Schnauzers with and without a history of probable pancreatitis. *J Vet Intern Med* 2011 25:20-25
4. Mawby DI, Whittemore JC, Fecteau KA. Canine pancreatic-specific lipase

concentrations in clinically healthy dogs and dogs with naturally occurring hyperadrenocorticism. *J Vet Intern Med*. 2014;28:1244-50  
5. Feldman EC. Evaluation of twice-daily lower-dose trilostane treatment administered orally in dogs with naturally occurring hyperadrenocorticism. *J Am Vet Med Assoc* 2011; 238: 1441-1451

### My Pathology Shop Feb Special



**Parvo Antigen Detection Kit (Immuno-Run) x5 - \$49.00 + GST (Normally \$65 + GST)**

**Expiry December 2015**

Please apply discount code: **mypathshop** when [ordering online](#)

Valid to the end of March and only while stock lasts.

Thank you for reading